2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# 703804

Entity Name: MULBERRY UNITED METHODIST CHURCH, INC.

Current Principal Place of Business:

306 NORTH CHURCH AVENUE,
MULBERRY, FL 33860

New Principal Place of Business:

Current Mailing Address:

306 NORTH CHURCH AVENUE,
MULBERRY, FL 33860

New Mailing Address:

FEI Number: 59-1591125 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELLIS, CARL M JR.
766 MARTINIQUE CIRCLE
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	FAULK, BERNICE	
Address:	6016 CHRISTINA DR. E	
City-St-Zip:	LAKELAND, FL 33813	
Title:	D	( ) Delete
Name:	NANCY, HATCH	
Address:	601 NE SECOND AVE	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	HOSLER, RON	
Address:	132 LAKE MICHIGAN DR	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	HURST, LAURIE	
Address:	PO BOX 443	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	DORSETT, AL	
Address:	262 WOOD HALL DR.	
City-St-Zip:	MULBERRY, FL 33860	
Title:	D	( ) Delete
Name:	CLEVELAND, TERRY	
Address:	3685 BAILEY DR.	
City-St-Zip:	MULBERRY, FL 33860	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE HOSLER AA 04/08/2008

Electronic Signature of Signing Officer or Director — Date